

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	H		11-19-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	S.V.	1088	11-19-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☒ Rejected N
☒ Allowed I
☒ (Through numerals) Canceled A
☒ Restricted O

Non-elected
 Interference
 Appeal
 Objected

Claim	Date	Claim	Date	Claim	Date
1		1		1	
2		2		2	
3		3		3	
4		4		4	
5		5		5	
6		6		6	
7		7		7	
8		8		8	
9		9		9	
10		10		10	
11		11		11	
12		12		12	
13		13		13	
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19		19		19	
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36		36		36	
37		37		37	
38		38		38	
39		39		39	
40		40		40	
41		41		41	
42		42		42	
43		43		43	
44		44		44	
45		45		45	
46		46		46	
47		47		47	
48		48		48	
49		49		49	
50		50		50	

If more than 150 claims or 10 actions
staple additional sheet here

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